

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000067319

**FILED**  
**Oct 14, 2011**  
**Secretary of State**

**Entity Name:** ALL HOURS PLUMBING, LLC

**Current Principal Place of Business:**

2909 S FAIRWAY DR  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

2909 S FAIRWAY DR  
MELBOURNE, FL 32901

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WIDING, JONATHAN R  
2909 S FAIRWAY DR  
MELBOURNE, FL 32901 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN WIDING

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WIDING, JOHN R  
Address: 2909 S FAIRWAY DR  
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM  
Name: BOLT, CHERYL M  
Address: 160 S SHEPARD DR #4  
City-St-Zip: COCOA BCH, FL 32931

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN WIDING

PRES

10/14/2011

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date